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Bib Data Sheet

CONFIRMATION NO. 5526

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/814,018	03/31/2004 RULE	606	3733	8627-373 (PA-5270- CIP2)
<b>APPLICANTS</b> Jason Urbanski, Ellettsville, IN; Ram H. Paul JR., Bloomington, IN; Roy K. Greenberg, Bratenahl, OH; Krasnodar Ivancev, Lund, SWEDEN;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/003,011 11/01/2001 which claims benefit of 60/245,811 11/03/2000 <i>YES PR.</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None PR.</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/11/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>PR.</i>		STATE OR COUNTRY IN	SHEETS DRAWING 7	TOTAL CLAIMS 21
Verified and Acknowledged Examiner's Signature Initials		INDEPENDENT CLAIMS 2		
<b>ADDRESS</b> 48003				
<b>TITLE</b> Medical grasping device				
<b>FILING FEE RECEIVED</b> 918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	